	PATENT A		(0683 662									
CLAIMS AS FILED - PART I (Column 1) (Column 2)								MALL ENTITY			OTHER SMALL	
TO	TAL CLAIMS		25				- [	RATE	FEE		RATE	FEE
FO	R		NUMBER FILED		NUMBER EXTRA		B4	SIC FEE	385.00	OЯ	Basic Fee	770.00
	TAL CHARGEA	BLE CLAIMS	28 minus 20=		• 5			X\$ 9=		OR	X\$18=	40.00
INDEPENDENT CLAIMS			3 minus 3 =		P			X43=		OR	X86=	
		DENT CLAIM PF	RESENT	SENT		0		+145=		OR	+290=	
• If the difference in column 1 is less than zero, enter "0" in column 2						L	OTAL		OR		960.00	
• · · ·										101.	OTHER	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							. <u>s</u>	MALL I	ENTITY	OR	SMALL	
A T	9-27-04	CLABAS REMADRING AFTER		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	.ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	. 25	Minus	<u>. C</u>	25	•	Ιſ	K\$ 9=		OR	X\$18=	1
MEN	Independent	. 3	Minus	464	3	,		X43=		OR	X86=	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ין י	145=		OR	+2907	
1 1								TOTAL DIT. FEE	-	OR	TOTAL ADDIT, FEE	
)	118/18	(Column 1) (Column 2) (Column 3)										
AMENDMENT 8		CLAMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•25	Minus	- 2	5		] [;	K\$ 9=		OR	X\$18=	·
	Independent	• 3	Minus	<b></b>	3	-	<b>↓</b>   □	X43-		OR	X86=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						۱ T	145-		OR	+290=	
	alan	/x /					40	TOTAL		OR	YOTAL ADDIT, FEE	
( ) d d / ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (												
AMENDMENT C		(Column 1) CLAMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	EST.	PRESENT EXTRA	$] \Gamma$	PATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 25	Minus	- 0	F5	•	] [;	C\$ 9=		oA	X\$18=	
	Independent	• 3	Minus	**	نح	•	Į [:	X43=		OR	X86=	
2	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J   _	145=		OR	•290=	
* If the entry in column 1 is less than the entry in column 2, write "O" in column 3.								TOTAL		OR	TOTAL	
* If the entry in column 1 is less than the entry in column 1 is less than the appropriate box in column 1.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20."  ** The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
	The "Highest Nor	iber Previously Pai	d FOF (1548 O	NIN-Shering	-eril is an	Tallacon carrier	-					F COMMERCE
							Peterli	<b>200 (1200)</b>	THE PERSON NAMED IN	~ VE		

Application or Docket Number